

Freedom Bank of Southern Missouri

Application for Employment

Personal Information				
Full Name			Social Security Number	
Street Address		City	State	Zip Code
Length of Time at this Address	Cell Phone Number	Position(s) Applied For		How soon could you report to work?
Former Address if Above Address is Less Than 3 Years		City	State	Zip Code
Are you over the age of 18?		Do you have the legal right to work in the United States?		
Type of Employment <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary		Salary Requirements	What days and hours if part-time? From: _____ To: _____	
Education				
Name	Address, City, State		Years Completed	Major or Type of Course
High School				
Trade/Business School				
College/University				
Graduate School				
List Degrees or any Banking, Finance, or Accounting courses taken:				
BACKGROUND INFORMATION				
Have you ever filed an application for employment with us or been employed with us before? Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, when?	Have you ever been bonded? Have you ever had a bond refused or cancelled?	If yes, explain.
Have you ever been convicted or pled guilty or "no contest" to a felony? (Conviction of a felony may not automatically disqualify an applicant for employment.) Yes <input type="checkbox"/> No <input type="checkbox"/> Court Date: _____ Court Location: _____ Nature of offense: _____				
Are you employed now?	If yes, why do you desire to make a change?		May we contact your present employer?	If no, explain.
GENERAL INFORMATION				
List job related skills, special training, certificates, licenses, software or computer skills relevant to this position:				
Summarize your qualifications and background as they support your application for this position (special interests, civic/community activities, professional groups, etc.):				
PERSONAL REFERENCES				
Provide three references not related to you whom you have known for at least one year:				
Name	Address, City, State		Phone Number	Years Known
How did you hear about us? <input type="checkbox"/> Employment Agency <input type="checkbox"/> Social Media <input type="checkbox"/> Website <input type="checkbox"/> Friend or Family Member: _____				

WORK RECORD			
Starting with present or most recent employment, list all previous employers. Include self-employment, U.S. Armed Forces experience, summer, part-time jobs, and all periods of unemployment of two weeks or more duration. Attach resume or separate sheet if, necessary.			
Company		Street Address	
		City, State, Zip	
Dates Employed	Starting Salary	Leaving Salary	Reason for leaving
Job Title/Duties			Name of Supervisor
			Telephone Number
Company		Street Address	
		City, State, Zip	
Dates Employed	Starting Salary	Leaving Salary	Reason for leaving
Job Title/Duties			Name of Supervisor
			Telephone Number
Company		Street Address	
		City, State, Zip	
Dates Employed	Starting Salary	Leaving Salary	Reason for leaving
Job Title/Duties			Name of Supervisor
			Telephone Number
Company		Street Address	
		City, State, Zip	
Dates Employed	Starting Salary	Leaving Salary	Reason for leaving
Job Title/Duties			Name of Supervisor
			Telephone Number
Company		Street Address	
		City, State, Zip	
Dates Employed	Starting Salary	Leaving Salary	Reason for leaving
Job Title/Duties			Name of Supervisor
			Telephone Number

JOB APPLICANT CERTIFICATION Please read carefully before signing			
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I certify that the information given by me in this application (and accompanying resume, if any) is true in all respects and I agree that if the information given is found to be false in any way, it shall be considered sufficient reason for denial of employment or discharge if discovered at a later date. I authorize the use of any information in this application to verify my statements. In addition, I authorize previous employers, all references and any other persons to answer all questions asked concerning my ability, character, reputation and previous education or employment record. I release all such persons from any liability or damages on account of having furnished such information. I consent to such investigations as the financial institution may make regarding driving records, law enforcement records, credit reports and my general background, and will agree to be fingerprinted, if necessary. I further understand that all applicable portions of this application must be completed or I will be ineligible for consideration for the position for which I am applying. I understand that nothing contained in this employment application or in the granting of an interview or of a position of employment is intended to create an employment contract between the financial institution and myself for either employment or for the providing of any benefits. No promises regarding employment have been made to me and I understand that no promise or guarantee of employment for any specific length of time or under any specified circumstances shall be binding upon the financial institution unless made in writing by or with the express written consent and authorization of the President of the financial institution. If an employment relationship is established, I understand that I will be employed at-will and that I have the right to terminate my employment at any time for any reason and the financial institution retains the same right. I understand that, depending on the position applied for, prior to being offered employment with the financial institution I may be requested to take an examination pertaining to skills or equipment operation. In the event that I have a disability which will affect my ability to take the test, I will so inform the financial institution prior to the administration of the test so that a reasonable accommodation can be made. Requested accommodations may include accessible testing sites, modified testing conditions, and accessible testing formats. The financial institution reserves the right to require medical documentation concerning the need for the accommodations. I understand a condition of employment and that they may be unilaterally revised, in whole or in part, at any time. Furthermore, should periodic drug testing be required, I consent to undergo such testing. Refusal to do so could result in my termination.

Important: If you do not understand or if you disagree with any portion of the above certification, do not sign before discussing with a member of management.

Signature of Applicant: _____ Date: _____



Fair Credit Reporting Act

Disclosure Statement and Authorization

Disclosure Statement

A consumer report may be obtained on you for employment purposes. It may be an "investigative consumer report" that includes information as to your character, general reputation, personal characteristics, and mode of living. For investigative consumer reports, you have a right to request disclosure of the nature and scope of the report, which involves personal interviews with sources such as your neighbors, friends, or associates.

Authorization

I voluntarily and knowingly authorize Freedom Bank of Southern Missouri or its authorized agents, for employment purposes only, to obtain or prepare consumer reports or investigative consumer reports as part of the process of my applying for employment, including independent contractor assignments as applicable. I understand that if Freedom Bank of Southern Missouri hires me or contracts for my services, my consent will apply, and Freedom Bank of Southern Missouri or its authorized agents may prepare and obtain consumer reports or investigative consumer reports throughout my employment or contract period. Please provide all requested information below.

First Name

Middle Name

Last Name

Suffix

Other Names Used

Current Address

Since

Previous Address

From- To

Previous Address

From- To

_____-_____-_____
Social Security Number

_____/_____/_____
Date of Birth*

Driver's License Number

State Issued

Signature: _____ Date: _____

*Date of birth is being requested for identification purposes only in obtaining accurate retrieval of records and will not be used for discriminatory purposes.